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			Document Page 1	_01 58	
Fill in this inf	formation to i	dentify your case	e and this filing:		
Debtor 1	Chad	М.	Jones		
	First Name	Middle Name	Last Name		
Debtor 2	Regina	В.	Jones		
(Spouse, if filing)) First Name	Middle Name	Last Name		
United States Ba	inkruptcy Court fo	r the: EASTERN DI	STRICT OF VIRGINIA		
Case number	16-11552-BFI	<		□ Cheel	if also is an
(if known)				_	if this is an ed filing
					•
Official Form	106A/B				
					40/45
Schedule A	/в: Propert	у			12/15
Part 1: De	scribe Each For have any lega	any additional pages	ving correct information. If mo, write your name and case nu ing, Land, or Other Real last in any residence, building, la	mber (if known). Answer eve	ry question.
	to Part 2. here is the proper	ty?			
1.1. 14915 Largo Vis	sta Dr Haymark	ket, VA Check al	the property? I that apply.	Do not deduct secured clai amount of any secured clai Creditors Who Have Claim	ms on Schedule D:
20169		Dupl	le-family home ex or multi-unit building dominium or cooperative	Current value of the entire property?	Current value of the portion you own?
County			ufactured or mobile home	\$661,105.00	\$661,105.00
County		Land			
			stment property	Describe the nature of yo interest (such as fee simp	•
		☐ Othe	eshare r	entireties, or a life estate)	
				- Residential	
		Check or	an interest in the property?		
		☐ Debt	or 1 only	☐ Check if this is comm	unity property
			or 2 only	(see instructions)	
			or 1 and Debtor 2 only		
		☐ At le	ast one of the debtors and anoth	ner	
			formation you wish to add abo identification number:	ut this item, such as local	_
		-	I of your entries from Part 1, in rite that number here		\$661,105.00
Part 2: De	scribe Your \	/ehicles			
			in any vehicles, whether they a	are registered or not? Include	e any vehicles
you own that some	eone else drives.	If you lease a vehicle	, also report it on Schedule G: E.	xecutory Contracts and Unexpi	red Leases.
3. Cars, vans, t	rucks, tractors,	sport utility vehicles,	motorcycles		
□ No ☑ Yes					

Official Form 106A/B Schedule A/B: Property page 1

Page 2 of 58 Document Case number (if known) 16-11552-BFK Debtor 1 Jones Middle Name First Name Last Name 3.1. Who has an interest in the property? Do not deduct secured claims or exemptions. Put the Check one. amount of any secured claims on Schedule D: Make: **Ford** Creditors Who Have Claims Secured by Property. Debtor 1 only F350 Model: Debtor 2 only Current value of the Current value of the Year: 2008 entire property? portion you own? Debtor 1 and Debtor 2 only Approximate mileage: 160,000 At least one of the debtors and another \$19,000.00 \$19,000.00 Other information: 2008 Ford F350 (approx. 160000 Check if this is community property (see instructions) miles) 3.2. Who has an interest in the property? Do not deduct secured claims or exemptions. Put the Check one. amount of any secured claims on Schedule D: Make: Chevrolet Creditors Who Have Claims Secured by Property. ■ Debtor 1 only Model: Suburban Debtor 2 only Current value of the Current value of the Year: 2012 entire property? portion you own? Debtor 1 and Debtor 2 only Approximate mileage: 79,000 At least one of the debtors and another \$25,000.00 \$25,000.00 Other information: ☐ Check if this is community property 2012 Chevrolet Suburban (approx. (see instructions) 79000 miles) 3.3. Who has an interest in the property? Do not deduct secured claims or exemptions. Put the Check one. amount of any secured claims on Schedule D: Make: Chevrolet Creditors Who Have Claims Secured by Property. Debtor 1 only Model: Corvette Debtor 2 only Current value of the Current value of the Year: 1998 Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: 80,000 At least one of the debtors and another \$11,000.00 \$11,000.00 Other information: 1998 Chevrolet Corvette (approx. Check if this is community property (see instructions) 80000 miles) Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories □ No **∀** Yes 4.1. Who has an interest in the property? Do not deduct secured claims or exemptions. Put the Check one. amount of any secured claims on Schedule D: Make: **Pilgrim** Creditors Who Have Claims Secured by Property. Debtor 1 only Model: **Travel Trailer** Debtor 2 only Current value of the Current value of the Year: 2006 entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another \$3.500.00 \$3.500.00 2006 Pilgrim Travel Trailer ☐ Check if this is community property (see instructions) Add the dollar value of the portion you own for all of your entries from Part 2, including any \$58,500.00 entries for pages you have attached for Part 2. Write that number here..... Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe..... See continuation page(s). \$1,160.00

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Document Page 4 of 58 Case number (if known) __16-11552-BFK Debtor 1 Jones Middle Name First Name Last Name 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same ■ No **▼** Yes..... Institution name: 17.1. Checking account: \$200.00 **BB&T Checking account** 17.2. Checking account: The Fauquier Bank checking account ending in 7407 \$200.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ☐ No Yes. Give specific \square information about Name of entity: % of ownership: them..... 100% Artistic Building Concepts Inc. \$1.00 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. **☑** No Yes. Give specific information about them..... Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: 403(b) \$2,780.65 Retirement account: Virginia Retirement System Defined Benefit Plan \$74,614.44 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others **☑** No Institution name or individual: 23. Annuities (A contract for a specific periodic payment of money to you, either for life or for a number of years) **☑** No Yes..... Issuer name and description: 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Yes...... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c) 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit **☑** No Yes. Give specific information about them

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Filed 06/14/16 Entered 06/14/16 10:40:06 Desc Main Document Page 6 of 58 Case number (if known) __16-11552-BFK Debtor 1 Middle Name Last Name 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims Yes. Describe each claim...... 35. Any financial assets you did not already list **☑** No ☐ Yes. Give specific information 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have \$77,803.09 attached for Part 4. Write that number here..... Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? ☐ No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned Yes. Describe.. 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices **☑** No Yes. Describe.. 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Yes. Describe.. Builder/Contractor Tools and ladders \$520.00 41. Inventory **☑** No Yes. Describe.. 42. Interests in partnerships or joint ventures **☑** No ☐ Yes. Describe..... Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe..... 44. Any business-related property you did not already list ☐ Yes. Give specific information. 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have \$520.00 attached for Part 5. Write that number here.....

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Deb	tor 1	Case 16-11	L552-BFK Doo m.	c 17 Filed 06/1 Document Jones	Page 7 of 5	d 06/14/16 10:40: 58 number (if known) _ 16-1 1	
		First Name	Middle Name	Last Name			
Pa	art 6			nmercial Fishing-Re n farmland, list it in Pa		You Own or Have ar	n Interest In.
46.	Do y	ou own or have a	any legal or equitable	interest in any farm- or	commercial fishing	g-related property?	
		No. Go to Part 7. Yes. Go to line 47	7 .				
							Current value of the portion you own? Do not deduct secured claims or exemptions.
47.			poultry, farm-raised fisl	n			
		Yes					
48.	Crop	oseither growing	g or harvested				
		No Yes. Give specific information					
49.	Farn	n and fishing equ	ipment, implements,	machinery, fixtures, and	d tools of trade		
		No Yes					
50.	Farn	n and fishing sup	plies, chemicals, and	feed			
	-	No Yes					
51.	Any	farm- and comm	ercial fishing-related	property you did not alr	eady list		
		No Yes. Give specific information					
52.			•	rom Part 6, including ar		· _ I	\$0.00
Pa	art 7	Describe Al	I Property You Ov	vn or Have an Inter	est in That You	Did Not List Above	
53.			operty of any kind you kets, country club mem				
	-	No Yes. Give specific	c information.			,	

54. Add the dollar value of all of your entries from Part 7. Write that number here...... →

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Debtor 1 Chad M. Jones Case number (if known) 16-11552-BFK
First Name Middle Name Last Name

Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2...... \$661,105.00 Part 2: Total vehicles, line 5 \$58,500.00 57. Part 3: Total personal and household items, line 15 \$2,571.00 Part 4: Total financial assets, line 36 \$77,803.09 Part 5: Total business-related property, line 45 \$520.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Copy personal 62. Total personal property. Add lines 56 through 61..... \$139,394.09 \$139,394.09 property total 63. Total of all property on Schedule A/B. Add line 55 + line 62..... \$800,499.09

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Case number (if known) 16-11552-BFK Debtor 1 Chad Μ. Jones Middle Name First Name Last Name Household goods and furnishings (details): Kitchen & Dining Items \$370.00 **Living Room Items** \$310.00 **Bedroom Items** \$415.00 Household tools \$45.00 **Books** \$20.00 **Equipment for sports and hobbies (details):** Fishing rods \$30.00 Rifle \$60.00 Hand gun \$60.00 12. Jewelry (details): Watches \$40.00 Wedding and engagement jewelry \$400.00

\$100.00

Costume jewelry

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Fill in this information to identify your case:					
Debtor 1	Chad	M.	Jones		
	First Name	Middle Name	Last Name		
Debtor 2	Regina	В.	Jones		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA					
Case number 16-11552-BFK (if known)					

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Cla	aim as Exempt		
 Which set of exemptions are you claiming? You are claiming state and federal nonbar You are claiming federal exemptions. 11 	nkruptcy exemptions.	even if your spouse is filing 11 U.S.C. § 522(b)(3)	with you.
2. For any property you list on Schedule A/B the	nat you claim as exen	mpt, fill in the information	below.
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: 14915 Largo Vista Dr Haymarket, VA 20169 Line from Schedule A/B:1.1	\$661,105.00	\$2.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
Brief description: 2008 Ford F350 (approx. 160000 miles) Line from Schedule A/B: 3.1	\$19,000.00	\$1.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
Brief description: 2012 Chevrolet Suburban (approx. 79000 miles) Line from Schedule A/B: 3.2	\$25,000.00	\$1.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
3. Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 No Yes. Did you acquire the property covered No Yes	years after that for cas	ses filed on or after the date	•

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Debtor 1

Chad М. Document Jones

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Case number (if known) 16-11552-BFK First Name Middle Name Last Name

Part 2: Additional Page			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	ount of the mption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	ck only one box for h exemption	
Brief description: 1998 Chevrolet Corvette (approx. 80000 miles)	\$11,000.00	\$1.00 100% of fair market value, up to any applicable statutory	Va. Code Ann. § 34-4
Line from Schedule A/B: 3.3		limit	
Brief description: 2006 Pilgrim Travel Trailer Line from Schedule A/B: 4.1	\$3,500.00	\$3,500.00 100% of fair market value, up to any	Va. Code Ann. § 34-4
		applicable statutory limit	
Brief description: Kitchen & Dining Items Line from Schedule A/B:6	\$370.00	\$370.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(4a)
Brief description: Living Room Items Line from Schedule A/B:6	\$310.00	\$310.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(4a)
Brief description: Bedroom Items Line from <i>Schedule A/B</i> :6	\$415.00	\$415.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(4a)
Brief description: Household tools Line from <i>Schedule A/B</i> :6	\$45.00	\$45.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(4a)
Brief description: Books Line from <i>Schedule A/B</i> :6	\$20.00	\$20.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
Brief description: Entertainment & Electronics Line from Schedule A/B:7	\$320.00	\$320.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(4a)
Brief description: Fishing rods Line from Schedule A/B: 9	\$30.00	\$30.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4

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Debtor 1

Chad М. Middle Name First Name

Last Name

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	ount of the nption you claim	Specific laws that allow exemption		
	Copy the value from Schedule A/B	ck only one box for n exemption			
Brief description: Rifle Line from <i>Schedule A/B</i> : 9	\$60.00	\$60.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(4b)		
Brief description: Hand gun Line from <i>Schedule A/B:</i> 9	\$60.00	\$60.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4		
Brief description: Clothing Line from Schedule A/B:11	\$400.00	\$400.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(4)		
Brief description: Watches Line from Schedule A/B:12	\$40.00	\$40.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4		
Brief description: Wedding and engagement jewelry Line from <i>Schedule A/B</i> :12	\$400.00	\$400.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(1a)		
Brief description: Costume jewelry Line from <i>Schedule A/B</i> :12	<u>\$100.00</u>	\$100.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4		
Brief description: 2 Dogs Line from Schedule A/B:13	<u>\$1.00</u>	\$1.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4		
Brief description: Cash on hand Line from <i>Schedule A/B</i> :	\$2.00	\$2.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4		
Brief description: BB&T Checking account Line from Schedule A/B: 17.1	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4		

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Case number (if known) 16-11552-BFK

Debtor 1

Chad First Name

М. Middle Name Document Jones

Last Name

- Additio

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B		ck only one box for h exemption	
Brief description: The Fauquier Bank checking account ending in 7407 Line from Schedule A/B:	\$200.00		\$200.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
Brief description: Artistic Building Concepts Inc.	\$1.00	1	\$1.00 100% of fair market	Va. Code Ann. § 34-4
Line from Schedule A/B:19			value, up to any applicable statutory limit	
Brief description: Virginia Retirement System Defined Benefit Plan Line from Schedule A/B: 21	\$74,614.44		\$74,614.44 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(n)
Brief description: 403(b)	\$2,780.65	☑	\$2,780.65 100% of fair market	11 U.S.C. § 522(n)
Line from Schedule A/B:21			value, up to any applicable statutory limit	
Brief description: 2015 Federal Tax Refund - Come & Gone	\$1.00	7	\$1.00 100% of fair market	Va. Code Ann. § 34-4
Line from Schedule A/B:			value, up to any applicable statutory limit	
Brief description: 2015 State Tax Refund - Come & Gone	\$1.00	Ø	\$1.00 100% of fair market	Va. Code Ann. § 34-4
Line from Schedule A/B:			value, up to any applicable statutory limit	
Brief description: Term Life through work	\$1.00	7	\$1.00 100% of fair market	Va. Code Ann. § 34-4
Line from Schedule A/B:31			value, up to any applicable statutory limit	
Brief description: Inchoate Inheritance	\$2.00	☑	\$2.00 100% of fair market	Va. Code Ann. § 34-4
Line from Schedule A/B:32			value, up to any applicable statutory limit	
Brief description: Regina Jones v. Johnson & Johnson Class	Unknown	Ø	\$0.00 100% of fair market	Va. Code Ann. § 34-4
Action (1st exemption claimed for this asset) Line from Schedule A/B:33			value, up to any applicable statutory limit	

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Debtor 1 Chad M. Jones Case number (if known) 16-11552-BFK
First Name Middle Name Last Name

Part 2: **Additional Page** Brief description of the property and line on **Current value of** Amount of the Specific laws that allow exemption Schedule A/B that lists this property exemption you claim the portion you own Copy the value from Check only one box for Schedule A/B each exemption Brief description: Unknown \$0.00 Va. Code Ann. § 34-28.1 Regina Jones v. Johnson & Johnson Class 100% of fair market **Action** value, up to any (2nd exemption claimed for this asset) applicable statutory limit Line from Schedule A/B: 33 Brief description: \$520.00 \$520.00 Va. Code Ann. § 34-26(7) \checkmark **Builder/Contractor Tools and ladders** 100% of fair market value, up to any Line from Schedule A/B: 40 applicable statutory limit

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Case	10 11002 01 1	[Document Pa	ae 15 of 58	4/10 10.40.00	Desc Main
Fill in this info	ormation to iden	tify your case				
Debtor 1	Chad	М.	Jones			
	First Name	Middle Name	Last Name			
Debtor 2	Regina	В.	Jones			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the	EASTERN DIS	STRICT OF VIRGINIA	<u> </u>		
Case number	16-11552-BFK					
(if known)					Check if this is amended filing	
Official Form	106D					,
	<u>_</u>	a Hava Cla	sime Secured b	v Proporty		10/15
Schedule D:	Creditors wr	io nave Cia	ims Secured b	y Property		12/15
On the top of any a 1. Do any credit □ No. Chec □ Yes. Fill	additional pages, wr	ite your name ar ured by your pro t this form to the on below.	e Additional Page, fill it ad case number (if kno operty? court with your other sch	wn).		
2. List all secure	ed claims. If a credite	or has more than				
	creditor separately for particular claim, list th			Column A Amount of claim	Column B Value of collateral	Column C Unsecured
much as possi	ble, list the claims in			Do not deduct the	that supports this	portion
creditor's name	е.			value of collateral	claim	If any
2.1		Describe the secures the	e property that	\$115,158.04	\$661,105.00	\$115,158.04
BB&T		— 14915 Larg				
Creditor's name PO BOX 1847		Haymarket				
Number Street						
		— As of the da	te you file, the claim is	: Check all that apply.		
		Continge	ent			
Wilson City	NC 27894 State ZIP Code	Unliquida				
Who owes the deb		Disputed				
Debtor 1 only	it: Offeck offe.		n. Check all that apply			
Debtor 2 only		_	ement you made (such a		car loan)	
Debtor 1 and D	ebtor 2 only		r lien (such as tax lien, r nt lien from a lawsuit	nechanic's ilen)		
	the debtors and anoth	30r <u>-</u>	cluding a right to offset)			
Check if this c		2nd Mt				
Date debt was inco	-	Last 4 digits	of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$115,158.04

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Debtor 1 Chad M. Jones Case number (if known) 16-11552-BFK

First Name Middle Name Last Name

Additional Page

After listing any entries on this page, number them sequentially from the previous page.

Column A

Amount of claim

Do not deduct the value of collateral

Column B
Value of collateral
that supports this
claim

Column C
Unsecured
portion
If any

2.2	Describe the property that secures the claim:	\$38,406.00	\$25,000.00	\$13,406.00
M&T Bank Creditor's name POB 900 Number Street	2012 Chevy Suburban			
Millsboro DE 19966 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, musure) Judgment lien from a lawsuit Other (including a right to offset) Purchase Money	s mortgage or secured car	loan)	
Date debt was incurred	Last 4 digits of account number			
PWC Employees CU Creditor's name 12715 Ridgefield Vill Dr Number Street	Describe the property that secures the claim: Chevy Corvette	\$19,933.00	\$11,000.00	\$8,933.00
Woodbridge VA 22193 City State ZIP Code Who owes the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, musure) Judgment lien from a lawsuit Other (including a right to offset) Purchase Money	s mortgage or secured car	loan)	
Date debt was incurred	_Last 4 digits of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$58,339.00

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Debtor 1 Chad M. Jones Case number (if known) 16-11552-BFK
First Name Middle Name Last Name

Part 1:

Additional Page

After listing any entries on this page, number them sequentially from the previous page.

Column A

Amount of claim

Do not deduct the value of collateral

Column B
Value of collateral
that supports this
claim

Column C
Unsecured
portion
If any

2.4	Describe the property that secures the claim:	\$682,623.67	\$661,105.00	\$21,518.67
Specialized Loan Svc Creditor's name POB 266005 Number Street	14915 Largo Vista Dr Haymarket, VA 20169			
Littleton CO 80163 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, musult) Judgment lien from a lawsuit Other (including a right to offset) 1st Mtg	s mortgage or secured ca	r Ioan)	
Date debt was incurred	Last 4 digits of account number			
Z.5 Tower FCU Creditor's name 7901 Sandy Spring Rd Number Street	Describe the property that secures the claim: 2008 Ford F350	\$28,714.00	\$19,000.00	\$9,714.00
Laurel MD 20707 City State ZIP Code Who owes the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, musult) Unliquidated Statutory lien (such as tax lien, musult) Other (including a right to offset) Purchase Money	s mortgage or secured ca	r loan)	
Date debt was incurred	Last 4 digits of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$711,337.67

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$884,834.71

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ill in this inf	ormation to iden	tify your case:				
Debtor 1	Chad First Name	M. Middle Name	Jones Last Name			
Dobtor O		B.	_			
Debtor 2 (Spouse, if filing)	Regina First Name	Middle Name	Jones Last Name			
United States Ba	nkruptcy Court for the	EASTERN DISTR	ICT OF VIRGINIA			
Case number (if known)	<u>16-11552-BFK</u>]] (
(II KIIOWII)						а

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

- Do any creditors have priority unsecured claims against you?
 - No. Go to Part 2.
 - Yes.
- 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

		Total claim	Priority amount	Nonpriority amount
2.1		Unknown	Unknown	Unknown
Prince William Circuit Court Priority Creditor's Name 9311 Lee Ave Number Street	- Last 4 digits of account number When was the debt incurred?			
Manassas VA 20110 City State ZIP Code	As of the date you file, the claim is: Contingent Unliquidated Disputed	: Check all that app	bly.	
Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No	Type of PRIORITY unsecured claim ☐ Domestic support obligations ☐ Taxes and certain other debts yo ☐ Claims for death or personal injurintoxicated ☑ Other. Specify Administrative Priority	u owe the governm	ent	

Case 16-11552-BFK Doc 17 Filed 06/14/16 Entered 06/14/16 10:40:06 Desc Main Document Page 19 of 58 Case number (if known) 16-11552-BFK Debtor 1 Chad М. Jones Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with you other schedules. $\mathbf{\Delta}$ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2. **Total claim** 4.1 \$623.50 Last 4 digits of account number Advance America Nonpriority Creditor's Name When was the debt incurred? 8368 Sudley Rd As of the date you file, the claim is: Check all that apply. Number Street ☐ Contingent Unliquidated Disputed Manassas ٧A 20109 City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only \square Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Payday Loan Is the claim subject to offset? **☑** No ☐ Yes 4.2 \$2,639.35 **Barclay's Bank Delaware** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 700 Prides Xing As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed Newark DE 19713 State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans □ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only \square that you did not report as priority claims

Official Form 106E/F

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

✓ No Yes

At least one of the debtors and another

☐ Check if this claim is for a community debt

Other. Specify

Credit Card

Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1

Chad Jones М. First Name Middle Name Last Name Case number (if known) 16-11552-BFK

Part 2: Your NONPRIORITY Unsecur	ed Claims Continuation Page	
After listing any entries on this page, number ther previous page.	n sequentially from the	Total claim
4.3		\$1,113.00
Capital One	Last 4 digits of account number 6 9 8 9	Ψ1,110.00
Nonpriority Creditor's Name	When was the debt incurred?	
POB 30285 Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Salt Lake City UT 84130	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?	o.oun ouru	
☑ No		
Yes		
4.4		64 445 00
	Look 4 divite of account number 5 0 7 4	\$1,145.00
Capital One Nonpriority Creditor's Name	_ Last 4 digits of account number _ 5 _ 2 _ 7 _ 1	
POB 30285	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	Disputed	
Salt Lake City UT 84130 City State ZIP Code	Turns of NONDRIORITY unaccounted alsies.	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Credit Card	
No No		
Yes		
4.5		\$883.00
Capital One	_ Last 4 digits of account number _ <u>9 _ 2 _ 6 _ 6</u>	
Nonpriority Creditor's Name POB 30285	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Salt Lake City UT 84130	- — ——————————————————————————————————	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations existing out of a congretion agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? No		
✓ No Yes		

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Debtor 1

Chad М. First Name Middle Name Jones Last Name Case number (if known) 16-11552-BFK

Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$1,131.00
Capital One	Last 4 digits of account number	
Nonpriority Creditor's Name POB 30285	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Salt Lake City UT 84130	─	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No Yes		
4.7		\$1,000.00
Capital One	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
POB 30285 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Salt Lake City UT 84130	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 1 only Debtor 2 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
No You		
Yes		
4.8		\$78,881.00
Federal Loan Svcing Credit	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
POB 60610 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Harrisburg PA 17106	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	✓ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?		
No You		
Yes		

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Debtor 1

Chad М. First Name Middle Name

Jones Last Name

Part 2: Your NONPRIORITY Unsecur	ed Claims Continuation Page	
After listing any entries on this page, number ther previous page.	n sequentially from the	Total claim
4.9		\$559.00
First Premier Bank	Last 4 digits of account number 5 4 4 0	<u> </u>
Nonpriority Creditor's Name 601 S Minnesota Ave	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	☐ Unliquidated ☐ Disputed	
Sioux Falls SD 57104 City State ZIP Code	- (NONDRIGHTY	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No		
Yes		
4.10		\$625.00
First Premier Bank	Last 4 digits of account number	
Nonpriority Creditor's Name 601 S Minnesota Ave	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	Disputed	
Sioux Falls SD 57104 City State ZIP Code	- Turns of NONDRIORITY was a sound a lain.	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
No You		
Yes		
4.11		\$400.00
First Premier Bank	Last 4 digits of account number	
Nonpriority Creditor's Name 601 S Minnesota Ave	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
Cierry Felle CD 57404	Disputed	
Sioux Falls SD 57104 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		

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Debtor 1

Chad М. First Name Middle Name Jones Last Name Case number (if known) 16-11552-BFK

	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.12		\$689.00
Kohls/Cap 1	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO BOX 3115 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Milwaukee WI 53201	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.13		\$3,100.00
Mariner Finance of Virginia LLC	Last 4 digits of account number	
Nonpriority Creditor's Name 4118 Leonard Dr Ste 200	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Fairfax VA 22030		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.14		\$63,934.44
Michael & Nancy Gleysteen	Last 4 digits of account number	
Nonpriority Creditor's Name 14428 Chamberry Cir	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Haymarket VA 20169		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations origing out of a congration agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
Check if this claim is for a community debt	Misc	
Is the claim subject to offset? No		
Yes		

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Debtor 1

ChadM.JonesFirst NameMiddle NameLast Name

Case number (if known) 16-11552-BFK

After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.15		#8 200 00
	Last 4 digits of account number	\$8,300.00
Peter Martin Nonpriority Creditor's Name	Last 4 digits of account number	
7014 Old Carolina Rd	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Gainesville VA 20155	bisputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Misc	
Is the claim subject to offset?	MISC	
No		
Yes		
4.16		\$7,995.00
PWC Employees CU	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
12715 Ridgefield Vill Dr	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
	Disputed	
Woodbridge VA 22193 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Loan	
Is the claim subject to offset?		
☑ No		
Yes		
4.47		
4.17		\$2,741.00
PWC Employees CU	Last 4 digits of account number	
Nonpriority Creditor's Name 12715 Ridgefield VIII Dr	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Woodbridge VA 22193	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community debt	Loan	
Is the claim subject to offset?		
☑ No ☐ Yes		

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Debtor 1

Jones Middle Name First Name

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Case number (if known) 16-11552-BFK

Last Name Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.18 \$9,906.00 PWC Employees CU Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 12715 Ridgefield Vill Dr As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Disputed Woodbridge VA 22193 State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only ◩ that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Loan Is the claim subject to offset? **✓** No ☐ Yes 4.19 \$48,000.00 Last 4 digits of account number Reico Kitchen & Bath Nonpriority Creditor's Name When was the debt incurred? 6790 Commercial Dr As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed 22151 Springfield ۷A ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Misc Is the claim subject to offset? **☑** No ☐ Yes 4.20 \$5,535.00 Springleaf Fin Svcs Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? **POB 59** As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed **Evansville** 47701 ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans ■ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only \square that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Loan Is the claim subject to offset? **☑** No

Yes

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Debtor 1

Chad M.

First Name Middle Name

Jones Cas

Last Name

Case number (if known) __16-11552-BFK

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.21 \$750.00 SYNCB/Amazon Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? POB 965015 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed Orlando FL 32896 State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only ◩ that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **✓** No ☐ Yes 4.22 \$2,984.00 Last 4 digits of account number SYNCB/Ashley Furniture Nonpriority Creditor's Name When was the debt incurred? POB 960061 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed Orlando FL 32896 ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only \square that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Credit Card Is the claim subject to offset? **☑** No Yes 4.23 \$300.00 SYNCB/Paypal Smart Conn Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? POB 965005 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed Orlando 32896 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans ■ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only ◩ that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No Yes

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Debtor 1	Chad	М.	Jones	Case number (if known) 16-11552-BFK	
	First Name	Middle Name	Last Name	· ,	_
Part 2:	Your NON	PRIORITY Unsecu	red Claims Continu	ation Page	
					_
	• .	this page, number the	em sequentially from the	Total claim	
previous p	oage.				
4.24				\$600.0	ın
SYNCB/V	Valmart		Last 4 digits of account		_
	Creditor's Name		When was the debt incu		
POB 965					
Number	Street			the claim is: Check all that apply.	
			Disputed		
Orlando		FL 32896			
City Who incur	red the debt?	State ZIP Code Check one.	Type of NONPRIORITY	unsecured claim:	
	1 only	Officer offic.	Student loans		
_	2 only			ut of a separation agreement or divorce	
Debtor	r 1 and Debtor 2 of		that you did not repo	profit-sharing plans, and other similar debts	
At leas	st one of the debt	ors and another	Other. Specify	profit sharing plans, and other similar dobte	
☐ Check	if this claim is f	or a community debt	Credit Card		
Is the clair	m subject to offs	et?			
☑ No	-				
Yes					
4.25					
4.23				\$700.0	0
Target Co			Last 4 digits of account	number	
PO Box 6	Creditor's Name		When was the debt incu	urred?	
Number	Street		As of the date you file,	the claim is: Check all that apply.	
			Contingent		
			Unliquidated		
Minneapo	olis	MN 55440	Disputed		
City		State ZIP Code	Type of NONPRIORITY	unsecured claim:	
	red the debt?	Check one.	Student loans		
_	r 1 only r 2 only		Obligations arising o	ut of a separation agreement or divorce	
	r 1 and Debtor 2 o	nnlv	that you did not repo	· · · · · ·	
	st one of the debt	•	— Other Carette	profit-sharing plans, and other similar debts	
_	if this claim is f	or a community debt	Other. Specify Credit Card		
	m subject to offs		Oreun Caru		
✓ No	oubjoot to one				
Yes					
4.26				\$1,000.0	0
The Fauc	uier Bank		Last 4 digits of account	t number	
	reditor's Name		When was the debt incu	urred?	
Number	house Square Street		As of the date you file,	the claim is: Check all that apply.	
			Contingent	,	
			Unliquidated		
Warrento	n .	VA 20186	Disputed		
City	···	State ZIP Code	Type of NONPRIORITY	unsecured claim:	
	red the debt?	Check one.	Student loans		
_	1 only			ut of a separation agreement or divorce	
Debtor	r 2 ANIV				

Is the claim subject to offset?

Debtor 1 and Debtor 2 only

 $\overline{\ }$ At least one of the debtors and another

☐ Check if this claim is for a community debt

Debtor 2 only

Other. Specify

Loan

that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 Chad M. Jones Case number (if known) 16-11552-BFK

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
The Fauquier Bank Nonpriority Creditor's Name 10 Courthouse Square Number Street	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent	\$5,000.00
Warrenton City State ZIP Code Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Loan	
Is the claim subject to offset? ✓ No ✓ Yes		

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Debtor 1

ChadM.JonesFirst NameMiddle NameLast Name

Case number (if known) 16-11552-BFK

Part 3: List Others to Be Notified About a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

David D. Armistead	l III Esq/Gleysteen	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Cheek and). — Don't 1. Conditions with Driving Linear world Chaires
2750 Killarney Dr S	ite 203	Lineof (Check one): Part 1: Creditors with Priority Unsecured Claims
- Street		Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number
Woodbridge	VA 22192	<u> </u>
City	State ZIP Code	
Jeremy S. Tishler,	Esq	On which entry in Part 1 or Part 2 did you list the original creditor?
Name 9842 Business Way	/	Line 4.15 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number
Manassas	VA 20110	
City	State ZIP Code	
	uit Ct/M & N Gleystee	On which entry in Part 1 or Part 2 did you list the original creditor?
Name 9311 Lee Ave		Line of (Check one):
Number Street		· · ·
		Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number 5 9 0 0
Manassas City	VA 20110 State ZIP Code	
City	State ZIF Gode	
	nty GDC/Peter Martin	On which entry in Part 1 or Part 2 did you list the original creditor?
Name 9311 Lee Ave		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		_ _
		Part 2: Creditors with Nonpriority Unsecured Claims
	VA 00110	Last 4 digits of account number 7 7 0 0
Manassas City	VA 20110 State ZIP Code	
Oity	State ZIF Code	
Prince William GDO	C/PWC Employees CU	On which entry in Part 1 or Part 2 did you list the original creditor?
Name 9311 Lee Ave		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		
		Part 2: Creditors with Nonpriority Unsecured Claims
Manageag	VA 20110	Last 4 digits of account number 7 1 0 0
Manassas City	VA 20110 State ZIP Code	

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Debtor 1

ChadM.JonesFirst NameMiddle NameLast Name

Case number (if known) 16-11552-BFK

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b. Taxes and certain other debts you owe the government		6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	^{6d.} +	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$78,881.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} +	\$171,653.29
	6j.	Total. Add lines 6f through 6i.	6j.	\$250,534.29

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Fill in this inf	ormation to	identify your case	:
Debtor 1	Chad	М.	Jones
	First Name	Middle Name	Last Name
Debtor 2	Regina	В.	Jones
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Ba	nkruptcy Court fo	or the: EASTERN DIS	TRICT OF VIRGINIA
Case number	16-11552-BF	K	
(if known)			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease
 is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of
 executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Fill in this inf	ormation to iden	tify your case:		
Debtor 1	Chad First Name	M. Middle Name	Jones Last Name	
Debtor 2 (Spouse, if filing)	Regina First Name	B. Middle Name	Jones Last Name	
United States Bar	nkruptcy Court for the	EASTERN DISTR	RICT OF VIRGINIA	
Case number (if known)	16-11552-BFK			Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

two nee	two married people are filing together, both are equally responsible for a needed, copy the Additional Page, fill it out, and number the entries in the page. On the top of any Additional Pages, write your name and case nu	supplying correct information. If more space is ne boxes on the left. Attach the Additional Page to this			
1.	 Do you have any codebtors? (If you are filing a joint case, do not lis ✓ No ✓ Yes 	t either spouse as a codebtor.)			
2.	include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Pue No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with	erto Rico, Texas, Washington, and Wisconsin.)			
	□ No	you at the time.			
3.	In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on <i>Schedule D</i> (Official Form 106D), <i>Schedule E/F</i> (Official Form 106E/F), or <i>Schedule G</i> (Official Form 106G). Use <i>Schedule D</i> , <i>Schedule E/F</i> , or <i>Schedule G</i> to fill out Column 2.				
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt			
		Check all schedules that apply:			

Official Form 106H **Schedule H: Your Codebtors** page 1

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Fill in this information to identify your case:							
Debtor 1	Chad First Name	M. Middle Name	Jones Last Name				
Debtor 2	Regina	B.	Jones	Che	eck if this is:		
(Spouse, if filing)	First Name	Middle Name	Last Name		An amended filing		
United States Bankruptcy Court for the:		EASTERN DISTRICT OF VIRGINIA		ㅁ	A supplement showing postpetition chapter 13 income as of the following date:		
Case number	16-11552-BFK				onapier to moonie as of the following date.		
(if known)					MM / DD / YYYY		

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Describe	Empl	ovment
ган н	DE3CI IDE		JVIIIGIII

art ii Describe Empir	,				
Fill in your employment information.		Debtor 1		Debtor 2 or non-	filing spouse
If you have more than one job, attach a separate page with information about	Employment status	Employed Not employed Leadman Pendleton Homes McLean, VA Number Street		Employed Not employed Admin Coord Prince William County Public Scho 15000 Graduation Dr Number Street Haymarket, VA	
additional employers.	Occupation				
Include part-time, seasonal, or self-employed work.	Employer's name				
Occupation may include student or homemaker, if it applies.	Employer's address				
		City	State Zip Code	City	State Zip Code
	How long employed t	_	5tato =p 5500	•	Ciaio 2,p 0000
	Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it	Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's name Employer's address	Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Cocupation Cocupation Employment status Cocupation Employment status Cocupation Cocupation Employer's name Cocupation Employer's name Cocupation Homes Employer's address McLean, VA Number Street	Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's name Employer's name Employer's address McLean, VA Number Street City State Zip Code	Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation Cocupation may include student or homemaker, if it applies. Debtor 1 Debtor 2 or non-include

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Debtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$3,357.50	\$7,943.82
3.	Estimate and list monthly overtime pay.	3.	+\$0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$3,357.50	\$7,943.82

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M.

Debtor 1 Chad Case number (if known) 16-11552-BFK Jones Middle Name First Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here \$3,357.50 \$7,943.82 List all payroll deductions: \$427.85 \$1,534.20 5a. Tax, Medicare, and Social Security deductions 5a \$0.00 \$317.60 5b. Mandatory contributions for retirement plans 5b. \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 \$234.48 \$0.00 \$834.96 5e. Insurance 5e. 5f. **Domestic support obligations** 5f. \$0.00 \$0.00 \$0.00 \$0.00 5g. Union dues 5g. 5h. Other deductions. \$0.00 5h. 4 \$0.00 Specify: Add lines 5a + 5b + 5c + 5d + 5e + 5f + Add the payroll deductions. \$427.85 \$2,921.24 5g + 5h. Calculate total monthly take-home pay. 7. Subtract line 6 from line 4. \$2,929.65 \$5,022.58 List all other income regularly received: 8a. Net income from rental property and from operating a 8a. \$0.00 \$0.00 business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b. \$0.00 \$0.00 8c. Family support payments that you, a non-filing spouse, or a 8c \$0.00 \$0.00 dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 \$0.00 8e. Social Security \$0.00 \$0.00 Other government assistance that you regularly receive Include cash assistance and the value (if known) or any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 \$0.00 8g. Pension or retirement income 8g. \$0.00 \$0.00 8h. Other monthly income. Specify: AVG TAX REFUND 8h. _ \$0.00 \$583.00 **Add all other income.** Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$583.00 \$0.00 Calculate monthly income. Add line 7 + line 9. \$5,022.58 \$3,512.65 \$8,535.23 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly 12. \$8,535.23 income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, Combined if it applies. monthly income 13. Do you expect an increase or decrease within the year after you file this form? **✓** No. None. Yes. Explain:

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F	ill in this inforr	nation to identi	fy your case:	1	490 00 01 0	Chack	if this is:	
	Debtor 1	Chad First Name	M. Middle Name	Jones Last Name		□ A	n amended filing supplement showing	postpetition
	Debtor 2 (Spouse, if filing)	Regina First Name	B. Middle Name	Jones Last Name		c	hapter 13 expenses a ollowing date:	s of the
	United States Bank	ruptcy Court for the	EASTERN DIST	RICT OF VIR	GINIA	N	IM / DD / YYYY	
	Case number (if known)	<u>16-11552-BFK</u>			_			
<u>Of</u>	ficial Form 10	<u> 26J</u>						
Sc	chedule J: Yo	our Expense	S					12/15
cor	rect information. me and case numb	If more space is ne	eeded, attach anothe wer every question.	r sheet to this			y responsible for su additional pages, wr	
1.	Is this a joint cas	se?						
2.	_ ✓ No	Debtor 2 live in a s o es. Debtor 2 must fi pendents?	eparate household? e Official Form 106J- No Yes. Fill out this inf- for each dependent.	ormation D	r Separate Househ ependent's relatio ebtor 1 or Debtor	onship t		Does dependent live with you?
	Debtor 2.		for each dependent.		on		13	□ No
	Do not state the d	dependents'		_	on		10	- ☑ Yes □ No - ☑ Yes
				<u>S</u>	on		6	No Yes No Yes
3.	Do your expense expenses of peo yourself and you	ple other than	✓ No ☐ Yes	_				No Yes
Р	art 2: Estim	ate Your Ongoi	ng Monthly Expe	enses				
to r		s of a date after the					lement in a Chapter heck the box at the t	
			h government assist n Schedule I: Your In				Your expens	ses
4.			enses for your reside any rent for the grour				4.	\$2,746.33
	If not included in	line 4:						
	4a. Real estate t	taxes					4a	
	4b. Property, ho	meowner's, or rente	r's insurance				4b	
	4c. Home mainte	enance, repair, and	upkeep expenses				4c	\$75.00
	4d. Homeowner'	s association or cor	dominium dues				4d.	

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Debtor 1 Chad Μ. Jones First Name Middle Name Last Name

		Your exper	nses
5.	Additional mortgage payments for your residence, such as home equity loans	5	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$700.00
	6b. Water, sewer, garbage collection	6b	
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$270.00
	6d. Other. Specify: Cell Phones	6d	\$350.00
7.	Food and housekeeping supplies	7.	\$800.00
8.	Childcare and children's education costs	8	\$375.00
9.	Clothing, laundry, and dry cleaning	9.	\$120.00
10.	Personal care products and services	10.	\$110.00
11.	Medical and dental expenses	11.	\$200.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$400.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$100.00
14.	Charitable contributions and religious donations	14	\$40.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a	
	15b. Health insurance	15b	
	15c. Vehicle insurance	15c	\$235.00
	15d. Other insurance. Specify:	15d	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Car Tax	16.	\$40.00
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1 M&T Bank - Suburban	17a.	\$790.00
	17b. Car payments for Vehicle 2	17b	
	17c. Other. Specify:	17c	
	17d. Other. Specify:	17d	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.	Other payments you make to support others who do not live with you. Specify:	19.	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
	20a. Mortgages on other property	20a	
	20b. Real estate taxes	20b	
	20c. Property, homeowner's, or renter's insurance	20c	
	20d. Maintenance, repair, and upkeep expenses	20d	
	20e. Homeowner's association or condominium dues	20e	

Case 16-11552-BFK Doc 17 Filed 06/14/16 Entered 06/14/16 10:40:06 Desc Main Page 37 of 58 Document Debtor 1 Chad Case number (if known) 16-11552-BFK Μ. Jones First Name Middle Name Last Name 21. Other. Specify: 21. 22. Calculate your monthly expenses. 22a. Add lines 4 through 21. 22a. \$7,351.33 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. 22b. 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. \$7,351.33 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$8,535.23 23b. Copy your monthly expenses from line 22c above. 23b. \$7,351.33 Subtract your monthly expenses from your monthly income. 23c. \$1,183.90 The result is your monthly net income. 23c. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? ■ No. Explain here: ✓ Yes. **Ongoing medicals**

page 3

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Fill in this info	ormation to iden	tify your case:	
Debtor 1	Chad First Name	M. Middle Name	Jones Last Name
Debtor 2 (Spouse, if filing)	Regina First Name	B. Middle Name	Jones Last Name
United States Bar	nkruptcy Court for the:	EASTERN DISTR	ICT OF VIRGINIA
Case number (if known)	16-11552-BFK		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Р	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$661,105.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$139,394.09
	1c. Copy line 63, Total of all property on Schedule A/B	\$800,499.09
Р	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$884,834.71
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$250,534.29
	Your total liabilities	\$1,135,369.00
Р	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$8,535.23
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$7,351.33

Case 16-11552-BFK Doc 17 Filed 06/14/16 Entered 06/14/16 10:40:06 Page 39 of 58 Document Chad Jones Case number (if known) 16-11552-BFK Debtor 1 Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. From the Statement of Your Current Monthly Income: Copy your total current monthly income from \$9,482.31 Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: **Total claim** From Part 4 on Schedule E/F, copy the following: \$0.00 9a. Domestic support obligations. (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9e. Obligations arising out of a separation agreement or divorce that you did not report as

Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9d.

\$78,881.00

\$78,881.00

\$0.00

\$0.00

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Fill in this information to identify your case:					
Debtor 1	Chad	М.	Jones		
	First Name	Middle Name	Last Name		
Debtor 2	Regina	В.	Jones		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court fo	or the: EASTERN DIS	TRICT OF VIRGINIA		
Case number	16-11552-BFI	K			
(if known)					

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone wh	no is NOT an attorney to help you fill out bankruptcy forms?
☑ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I I true and correct.	have read the summary and schedules filed with this declaration and that they are
X /s/ Chad M. Jones Chad M. Jones, Debtor 1	X /s/ Regina B. Jones Regina B. Jones, Debtor 2
Date <u>06/14/2016</u> MM / DD / YYYY	Date <u>06/14/2016</u> MM / DD / YYYY

Case 16-11552-BFK Doc 17 Filed 06/14/16 Entered 06/14/16 10:40:06 Desc Main

				Document	Page 41 of	58	2000
F	ill in this inf	ormation to ider	ntify your c	ase:			
D	ebtor 1	Chad First Name	M. Middle Name	Jones Last Name			
	ebtor 2	Regina	В.	Jones			
(S	Spouse, if filing)	First Name	Middle Name	Last Name			
Uı	nited States Ba	nkruptcy Court for the	e: EASTERN	DISTRICT OF VIR	GINIA		
	ase number known)	16-11552-BFK			_	Check if this amended fil	
<u>Of</u>	ficial Form	<u>107</u>					
St	atement o	f Financial At	fairs for	Individuals Fi	ling for Bank	ruptcy	04/16
cor you	rect information recting the rection of the rection	n. If more space is se number (if know	needed, attac n). Answer e	ch a separate sheet t	o this form. On the	re equally responsible for si top of any additional pages Before	
1.	What is your ✓ Married ☐ Not marrie	current marital stat o	us?				
2.	☑ No			ere other than where		ow.	
3.	(Community p					unity property state or territo evada, New Mexico, Puerto Ri	
	✓ No Yes. Mak	e sure you fill out <i>Sc</i>	hedule H: You	ır Codebtors (Official F	Form 106H).		
P	art 2: Ex	plain the Source	s of Your I	ncome			
4.	Fill in the total If you are filing	amount of income yo	ou received fro	r from operating a buom all jobs and all bus that you receive toge	inesses, including p		endar years?
	_		Deb	otor 1		Debtor 2	
				ces of income k all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
	•	f the current year ur for bankruptcy:		Vages, commissions, onuses, tips	\$9,460.50	Wages, commissions, bonuses, tips	\$31,775.32
				Operating a business		Operating a business	
For	the last calend	dar year:		Vages, commissions, onuses, tips	\$11,000.00	Wages, commissions, bonuses, tips	\$75,000.00

(January 1 to December 31, 2015)

For the calendar year before that:

(January 1 to December 31, 2014)

\$22,000.00

Operating a business

■ Wages, commissions,

Operating a business

bonuses, tips

\$72,000.00

Operating a business

bonuses, tips

Operating a business

Wages, commissions,

Page 42 of 58 Document Case number (if known) 16-11552-BFK Debtor 1 Middle Name First Name Last Name 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? ☐ No. Go to line 7. Tyes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ■ No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of **Total amount** Amount you Was this payment for... payment paid still owe M&T Bank \$38,406.00 ■ Mortgage Monthly \$2,370.00 Creditor's name Car M **POB 900** Credit card Number Street Loan repayment Suppliers or vendors DE 19966 Other Millsboro City Dates of **Total amount** Amount you Was this payment for... payment paid still owe **Tower FCU** \$28,714.00 Monthly \$2,250.00 Mortgage Creditor's name Car \square 7901 Sandy Spring Rd Credit card Number Loan repayment Suppliers or vendors MD 20707 Other Laurel City State ZIP Code

Filed 06/14/16 Entered 06/14/16 10:40:06

Case 16-11552-BFK

Doc 17

Page 43 of 58 Document Case number (if known) 16-11552-BFK Debtor 1 Jones Middle Name First Name Last Name Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony. **☑** No ☐ Yes. List all payments to an insider. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. □ No Yes. Fill in the details. Case title Nature of the case Status of the case Court or agency Peter Martin v. Artistic Building **Warrant in Debt Prince William General District Court** Pending Court Name Concepts Inc. and Chad Jones Hrg: 9/22/2016 9311 Lee Avenue On appeal Number Street ☐ Concluded Case number GV16001477-00 Manassas ۷A 20110 ZIP Code City State Nature of the case Case title Court or agency Status of the case Prince William General District Court PWC Employees CU v. Chad **Warrant in Debt** ▼ Pending Court Name **Jones** Hearing 6/28/2016 9311 Lee Avneue On appeal Number Street Case number GV16005471-00 ☐ Concluded Manassas ۷A 20110 State **ZIP** Code Case title Nature of the case Court or agency Status of the case Nancy & Michael Gleysteen v. **Contract Action Prince William County Circuit Court ▼** Pending Artistic Building Concepts Inc. Court Name 9311 Lee Avenue Chad Jones, and Regina Jones On appeal Number Street ☐ Concluded Case number CL16001559-00 Manassas VA 20110 City State ZIP Code

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Page 44 of 58 Document Case number (if known) 16-11552-BFK Debtor 1 Jones Middle Name Last Name 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☐ Yes **List Certain Gifts and Contributions** Part 5: 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Part 6: **List Certain Losses** 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? **☑** No Yes. Fill in the details. Part 7: **List Certain Payments or Transfers** 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy. Yes. Fill in the details. Description and value of any property transferred Date payment Amount of or transfer was payment Law Offices of Robert R. Weed made Person Who Was Paid 45575 Shepard Drive, Suite #201 05/02/2016 \$2.500.00 Number Street Sterling ٧A 20164 State **ZIP Code** Email or website address Person Who Made the Payment, if Not You

Case 16-11552-BFK

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Case 16-11552-BFK Doc 17 Filed 06/14/16 Entered 06/14/16 10:40:06 Desc Main Page 45 of 58 Document Debtor 1 Chad Μ. **Jones** Case number (if known) 16-11552-BFK Middle Name First Name Last Name Description and value of any property transferred Date payment Amount of or transfer was payment Moneysharp.org made Person Who Was Paid \$20.00 Number Street City State ZIP Code Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Yes. Fill in the details. 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details. Description and value of any Describe any property or payments Date transfer property transferred received or debts paid in exchange was made Dealership Person Who Received Transfer Chevrolet Acadia traded in for 2014 **Chevrolet Suburban** Street Number City State ZIP Code Person's relationship to you None Description and value of any Date transfer Describe any property or payments property transferred received or debts paid in exchange was made **Chad Jones** Person Who Received Transfer Debtor wife transferred truck 12/2015 from her name to Debtor husband's name. Number Street ZIP Code

Person's relationship to you Spouse

Deb	otor 1	9	ASE 16-1 Chad First Name	.1552-BFK <u>M.</u>		Filed 06/14 Document Jones Last Name		Entered 06/14/1 e 46 of 58 Case number (if kno		Desc Main BFK
	you	in 10 are a No Yes.	years before beneficiar	ore you filed for y? (These are etails.	r bankruptcy, e often called a	did you transfer a asset-protection dev	vices.)	erty to a self-settled trus		e of which
	art 8					•		eposit Boxes, and S		WOUR .
٤0.	bene	efit, o	closed, sold	l, moved, or tra	nsferred?	-		or instruments held in	-	
						financial accounts; and other financial		es of deposit; shares in bons.	oanks, credit union	s, brokerage
		No Yes.	Fill in the de	etails.						
21.				r did you have or other valual		before you filed fo	or bankru	iptcy, any safe deposit	box or other depo	ository
	-	No Yes.	Fill in the de	etails.						
22.	Have	-	ı stored pro	pperty in a stora	age unit or pla	ace other than you	r home v	within 1 year before you	ı filed for bankrup	otcy?
			Fill in the de	etails.						
Ρ	art 9	:	Identify I	Property You	u Hold or C	ontrol for Som	eone E	lse		
23.	_		old or cont n trust for s		y that someoi	ne else owns? Inc	lude any	property you borrowe	d from, are storin	g for,
			Fill in the de	etails.						
Р	art 1	0:	Give Det	ails About E	nvironmen	tal Information	l			
For	the p	urpo	se of Part 1	0, the following	g definitions a	apply:				
	hazar	dous	or toxic su	ıbstance, waste	es, or material	l into the air, land,	soil, sui	oncerning pollution, co face water, groundwate s, wastes, or material.		
						efined under any e Iding disposal site		ental law, whether you	now own, operat	e, or
						ental law defines a inant, or similar ite		ardous waste, hazardou	ıs substance, toxi	ic
Rep	oort al	l no	ices, releas	ses, and procee	edings that yo	u know about, reg	ardless	of when they occurred.		
24.	Has law?	•	governmen	tal unit notified	I you that you	may be liable or p	ootential	y liable under or in viol	ation of an enviro	nmental
	¥.	No Yes.	Fill in the d	etails.						

ebtor 1	Chad	М.	Document Jones	Page	47 of 58 Case number (if known) 16-11552-BFK
	First Name	Middle Name	Last Name		· /
		overnmental unit of	any release of hazard	ous materia	al?
☑ No		I-			
☐ Ye	es. Fill in the detai	lS.			
		n any judicial or adn	ninistrative proceeding	g under an	y environmental law? Include settlements and
orders	S.				
☑ No)				
☐ Ye	es. Fill in the detai	ls.			
Part 11:	Give Details	About Vour Bu	siness or Connect	iono to 1	any Buoinese
rait i i	Give Details	S ADOUL TOUI BUS	silless of Collifect	IOIIS TO A	mry business
7. Within busing	-	ou filed for bankrupt	cy, did you own a bus	iness or ha	eve any of the following connections to any
	A sole proprieto	r or self-employed in a	a trade, profession, or c	ther activity	y, either full-time or part-time
Ī	A member of a	limited liability compar	ny (LLC) or limited liabil	ity partners	hip (LLP)
	A partner in a p				
		etor, or managing exec			•
5	An owner or at I	east 5% of the voting	or equity securities of a	corporation	1
_		ve applies. Go to Par			
✓ Ye	es. Check all that a	apply above and fill in	the details below for ea	ıch busines:	S.
			ibe the nature of the b	usiness	Employer Identification number
	uilding Concept	s Contr	actor/Builder		Do not include Social Security number or ITIN.
siness Nar	ne				EIN: –
mber S	treet	Name	of accountant or book	kkeeper	
		Debto	or		Dates business existed
					From 2008 To 2016
у	State	ZIP Code			
		ou filed for bankrupto , creditors, or other p		ncial stater	ment to anyone about your business? Include
NO NO)				
-	es. Fill in the detail	ls below.			
Part 12:	Sign Below	,			
ave read	I the answers on t	this Statement of Fin	ancial Affairs and any	attachmen	its, and I declare under penalty of perjury
			_		oncealing property, or obtaining money or
	•	tion with a bankrupto 341, 1519, and 3571.	y case can result in the	ines up to \$	\$250,000, or imprisonment for up to 20 years,
201111	5 6.6.6. 33 .6 <u>2</u> ,	5 · · · · · · · · · · · · · · · · · · ·			
	d M. Jones		X /s/ Regina B		
Chad M	. Jones, Debtor 1		Regina B. Jon	es, Debtor 2	2
Date _	06/14/2016		Date06/1	4/2016	
		_			
d you att	ach additional pa	ges to Your Stateme	nt of Financial Affairs	for Individu	uals Filing for Bankruptcy (Official Form 107)?
No					
Yes					
	_			,	
d you pa	y or agree to pay	someone who is not	an attorney to help yo	ou fill out b	ankruptcy forms?
No					
Yes. N	ame of person				Attach the Bankruptcy Petition Preparer's Notice,
					Declaration, and Signature (Official Form 119).

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Case 16-11552-BFK Doc 17 Filed 06/14/16 Entered 06/14/16 10:40:06 Desc Mair

s directed in lines 17 and 21:
to the calculations required by this
sable income is not determined 11 U.S.C. § 1325(b)(3).
sable income is determined 11 U.S.C. § 1325(b)(3).
ommitment period is 3 years. ommitment period is 5 years.

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- What is your marital and filing status? Check one only.
 - Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

Column A

Column B

		Deptor I	non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$1,528.58	\$7,953.73
3.	Alimony and maintenance payments. Do not include payments from a spouse.	\$0.00	\$0.00
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.	\$0.00	\$0.00

Net income from operating a business, profession, or farm

	Debtor 1	Debtor 2			
Gross receipts (before all deductions)	\$0.00	\$0.00			
Ordinary and necessary operating -	- \$0.00	\$0.00			
expenses			Copy		
Net monthly income from a business profession, or farm	\$0.00	\$0.00	here 👈	\$0.00	\$0.00

Case 16-11552-BFK Doc 17 Filed 06/14/16 Entered 06/14/16 10:40:06 Page 49 of 58 Document Case number (if known) 16-11552-BFK Debtor 1 Chad М. Jones Middle Name First Name Last Name Column B Column A Debtor 2 or **Debtor 1** non-filing spouse Net income from rental and other real property **Debtor 2** \$0.00 \$0.00 Gross receipts (before all deductions) \$0.00 \$0.00 Ordinary and necessary operating expenses Copy \$0.00 here \$0.00 \$0.00 \$0.00 Net monthly income from rental or other real property Interest, dividends, and royalties \$0.00 \$0.00 Unemployment compensation \$0.00 \$0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you..... For your spouse..... Pension or retirement income. Do not include any amount received that \$0.00 \$0.00 was a benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. \$7,953.73 \$1.528.58 \$9,482.31 Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** \$9,482.31 12. Copy your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. \square You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. \$0.00 Total..... \$9,482.31 14. Your current monthly income. Subtract the total in line 13 from line 12.

		Ca	se 16-11	552-BFK						L6 10:40:06	Desc Main
Deb	tor 1		had st Name	M. Middle Nam		Document Jones Last Name	Pag	ge 50 o - ^{Case}	† 58 e number (if kn	own) <u>16-11552</u>	-BFK
15.	Calc	ulate	your curren	t monthly incom	e for the ye	ear. Follow thes	e steps:				
	15a.	Cop	y line 14 her	e →							\$9,482.31
		Mul	tiply line 15a	by 12 (the numb	er of months	s in a year).					X 12
	15b.	The	result is you	r current monthly	income for	the year for this	part of the	e form			\$113,787.72
16.	Calc	ulate	the median	family income tl	nat applies	to you. Follow the	hese step	s:			
	16a.	Fill	in the state ir	n which you live.		\	/irginia				
	16b.	Fill	in the numbe	r of people in you	ur household	d.	5				
	16c.	To f	ind a list of a	pplicable mediar	n income am	e and size of hou nounts, go online be available at the	using the	link specif	fied in the sepa		<u>\$101,133.00</u>
17.	How	do th	e lines com	pare?							
	17a.		Line 15b is	less than or equa		c. On the top of part 3. Do NOT fill	-			•	ne is not determined I Form 122C-2).
	17b.	☑	11 U.S.C. §	3 1325(b)(3). Go	to Part 3 an	top of page 1 of tood fill out Calculated in the monthly income	ation of Y	our Dispo	sable Income		
Pa	art 3:		Calculate	Your Commi	tment Per	riod Under 11	1 U.S.C.	§ 1325(I	b)(4)		
18.	Copy	y you	r total avera	ge monthly inco	me from lir	ne 11					\$9,482.31
19.	that o	calcul	ating the con			u are married, yo S.C. § 1325(b)(4)					
	19a.	If th	e marital adj	ustment does not	t apply, fill ir	n 0 on line 19a					— \$0.00
	19b.	Sub	otract line 19	a from line 18.							\$9,482.31
20.	Calc	ulate	your curren	t monthly incom	e for the ye	ear. Follow thes	e steps:				
			•	-	-						\$9,482.31
				ne number of mo							X 12
	20b.	The	result is you	r current monthly	income for	the year for this	part of the	e form.			\$113,787.72
	20c.	Cop	y the mediar	n family income fo	or your state	and size of hou	sehold fro	m line 16c)		\$101,133.00
21.	How	do th	e lines com	pare?							
	_			an line 20c. Unle commitment perio		se ordered by the s. Go to Part 4.	court, on	the top of	page 1 of this t	orm,	
						less otherwise or <i>iod is 5 years.</i> G			on the top of pa	ge 1	
Pa	art 4:		Sign Belo	W							
	By si	gning	here, under	penalty of perjury	/ I declare th	nat the informatio	on on this	statement	and in any atta	chments is true	and correct.
	X /s	s/ Ch	ad M. Jone	S			χ <u>/s</u> /	Regina I	B. Jones		
			/I. Jones, Del						nes, Debtor 2		
	D		6/ 14/2016 MM / DD / YY				Da	ite 6/14/2	2016 DD / YYYY		
			/ / /	-							

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Fill in this inf	ormation to id	dentify your case	:
Debtor 1	Chad First Name	M. Middle Name	Jones Last Name
D			_
Debtor 2 (Spouse, if filing)	Regina First Name	B. Middle Name	Jones Last Name
United States Ba	nkruptcy Court for	r the: EASTERN DIS	TRICT OF VIRGINIA
Case number	16-11552-BFK	(
(if known)			

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/16

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

5

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$1,850.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age \$54.00 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 Copy \$270.00 \$270.00 Subtotal. Multiply line 7a by line 7b. People who are 65 years of age or older \$130.00 7d. Out-of-pocket health care allowance per person 7e. Number of people who are 65 or older Copy \$0.00 Subtotal. Multiply line 7d by line 7e. \$0.00 here Copy \$270.00 here -\$270.00 Total. Add lines 7c and 7f.....

Case 16-11552-BFK Doc 17 Filed 06/14/16 Entered 06/14/16 10:40:06 Page 52 of 58 Document Case number (if known) 16-11552-BFK Debtor 1 Chad M. Jones Middle Name First Name Last Name **Local Standards** You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities -- Insurance and operating expenses Housing and utilities -- Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities -- Insurance and operating expenses: Using the number of people you entered in line 5, \$657.00 fill in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities -- Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount listed \$2,251.00 for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by vour home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment BB&T \$547.79 Specialized Loan Svc \$2,746.33 Repeat this Copy amount on 9b. Total average monthly payment \$3,294.12 \$3,294,12 here line 33a. 9c. Net mortgage or rent expense. Copy Subtract line 9b (total average monthly payment) from line 9a (mortgage or \$0.00 \$0.00 here rent expense). If this number is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. 0. Go to line 14. 1. Go to line 12.

2 or more. Go to line 12.

12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the

operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

\$500.00

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Debtor 1 Chad M. Jones Case number (if known) 16-11552-BFK

First Name Middle Name Last Name

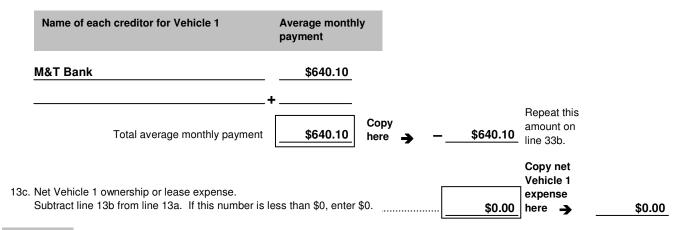
13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

Vehicle 1 Describe Vehicle 1: 2012 Chevy Suburban

13b. Average monthly payment for all debts secured by Vehicle 1.

Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.



Vehicle 2 Describe Vehicle 2: Chevy Corvette

13d. Ownership or leasing costs using IRS Local Standard. \$471.00

13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.

Transportation expense allowance regardless of whether you use public transportation.

not claim more than the IRS Local Standard for Public Transportation.

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may

also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may

Name of each creditor for Vehicle 2	Average monthly payment					
PWC Employees CU	\$332.22					
Total average monthly payment	\$332.22 Co			\$332.22	Repeat this amount on line 33c.	
13f. Net Vehicle 2 ownership or lease expense. Subtract line 13e from 13d. If this number is less	than \$0, enter \$0.			\$138.78	Copy net Vehicle 2 expense here	\$138.78
14. Public transportation expense: If you claimed 0 vehi	cles in line 11, using th	e IRS Loc	al Stanc	dards, fill in t	he Public	\$0.00

\$0.00

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Case number (if known) 16-11552-BFK Debtor 1 Chad M. Jones Middle Name First Name Last Name Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. 16. Taxes: The total monthly amount that you actually pay for federal, state and local taxes, such as income taxes, self-\$1,795.30 employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, \$317.76 union dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are \$0.00 filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative \$0.00 agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: \$0.00 as a condition for your job, or for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. \$375.00 Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that \$0.00 is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services \$49.00 for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted. 24. Add all of the expenses allowed under the IRS expense allowances. \$5,952.84 Add lines 6 through 23. **Additional Expense Deductions** These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24. 25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents. \$811.92 Health insurance \$23.04 Disability insurance Health savings account \$0.00 \$834.96 \$834.96 Total Copy total here Do you actually spend this total amount? No. How much do you actually spend? \square Yes 26. Continued contributions to the care of household or family members. The actual monthly expenses that you \$0.00 will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b). 27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the \$0.00 safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. By law, the court must keep the nature of these expenses confidential.

Document Page 55 of 58 Debtor 1 Chad M. Jones Case number (if known) 16-11552-BFK Middle Name First Name Last Name 28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses \$764.00 If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs. You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary. 29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$0.00 \$160.42* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23. * Subject to adjustment on 4/01/19, and every 3 years after that for cases begun on or after the date of adjustment. 30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are \$64.00 higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. You must show that the additional amount claimed is reasonable and necessary. 31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial \$40.00 instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4). Do not include any amount more than 15% of your gross monthly income. 32. Add all of the additional expense deductions. \$1,702.96 Add lines 25 though 31. **Deductions for Debt Payment** 33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Average monthly payment Mortgages on your home \$3,294.12 33a. Copy line 9b here..... Loans on your first two vehicles \$640.10 33b. Copy line 13b here..... \$332.22 Copy line 13e here..... 33d. List other secured debts: Name of each creditor for Identify property that Does payment other secured debt secures the debt include taxes or insurance? No Yes No Yes No Yes Copy total \$4,266.44 \$4,266.44 33e. Total average monthly payment. Add lines 33a through 33d...... here

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Case number (if known) 16-11552-BFK Debtor 1 Chad М. Jones Middle Name First Name Last Name 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. П State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep Yes. possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Identify property that Name of the creditor **Total cure** Monthly cure secures the debt amount amount Specialized Loan Svc 14915 Largo Vista Dr Haym \$27,800.00 \$463.33 ÷ 60 = Copy total \$463.33 Total \$463.33 here 35. Do you owe any priority claims--such as a priority tax, child support, or alimony--that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. Go to line 36. No. $\overline{\mathbf{A}}$ Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. $\div 60 =$ Total amount of all past-due priority claims..... \$0.00 36. Projected monthly Chapter 13 plan payment \$1.00 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). 7 % To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total \$0.07 Average monthly administrative expense \$0.07 here 37. Add all of the deductions for debt payment. Add lines 33g through 36. \$4,729.84 **Total Deductions from Income** 38. Add all of the allowed deductions. \$5,952.84 Copy line 24, All of the expenses allowed under IRS expense allowances..... \$1,702.96 Copy line 32, All of the additional expense deductions..... \$4,729.84 Copy line 37, All of the deductions for debt payment..... Copy total Total deductions \$12,385.64 \$12,385.64 here Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) 39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period.

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Debtor 1 Chad M. Jones Case number (if known) 16-11552-BFK
First Name Middle Name Last Name

Part 4: Sign Below

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

X /s/ Chad M. Jones
Chad M. Jones, Debtor 1

Date 6/14/2016

MM / DD / YYYY

X /s/ Regina B. Jones

Regina B. Jones, Debtor 2

Date 6/14/2016 MM / DD / YYYY